

# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Attorney Docket Number

113648

First Named Inventor

Mathilde Benveniste

COMPLETE IF KNOWN

☐ Declaration Submitted with Initial Filing OR ☒ Declaration submitted after Initial Filing

Application Number

09/401408

Filing Date

09/22/1999

Group Art Unit

2744

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Self-Configurable Wireless Systems: Spectrum Monitoring In A Layered Configuration

(Title of Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on 09/22/1999 as United States Application Number or PCT International

Application Number 09/401408

and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date( MM/DD/YYYY)	
60/116959	01/22/1999	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

Attorney Docket Number: 113648

**DECLARATION - Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	NOV 16 1999 PATENT & TRADEMARK OFFICE	

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar  
Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CONOVER, Michele L.	34962	DE LA ROSA, Jose R.	34810
DELACRUZ, Cedric G	36498	DWORETSKY, Samuel H.	27873
GARG, Rohini K	45272	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCHALE, Susan E.	35948
RESTAINO, Thomas A.	33444	STEINMETZ, Alfred G.	22971

☐ I also appoint the following additional registered practitioner(s) named on the supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto with full power to prosecute said application, to make alterations and amendments therein, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

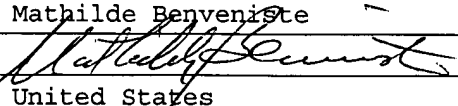
☐ Customer Number or Bar Code Label

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or ☒ Correspondence address below

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CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Mathilde Benveniste		
Signature			Date 11/9/99
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Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07079		

☐ Additional Inventors are being named on the separately numbered sheets attached hereto

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